

<b>PATENT APPLICATION FEE DETERMINATION RECORD</b> Effective October 1, 2003					Application or Docket Number <b>10625703</b>		
<b>CLAIMS AS FILED - PART I</b> (Column 1) (Column 2)					<small>SMALL ENTITY TYPE</small> <input type="checkbox"/> <small>OTHER THAN OR SMALL ENTITY</small>		
<b>TOTAL CLAIMS</b>		<b>40</b>	<b>RATE</b> <b>FEES</b> BASIC FEE 385.00 OR X\$ 9- X43- +145- TOTAL			<b>RATE</b> <b>FEES</b> BASIC FEE 770.00 OR X\$18- 360 X86- 86 +290- TOTAL 1276	
<b>FOR</b> <b>TOTAL CHARGEABLE CLAIMS</b>		NUMBER FILED 40 minus 20 = 20	NUMBER EXTRA 0				
<b>INDEPENDENT CLAIMS</b>		4 minus 3 = 1					
<b>MULTIPLE DEPENDENT CLAIM PRESENT</b> <input type="checkbox"/>							
* If the difference in column 1 is less than zero, enter "0" in column 2							
<b>CLAIMS AS AMENDED - PART II</b> (Column 1) (Column 2) (Column 3)					<small>SMALL ENTITY</small> <input type="checkbox"/> <small>OTHER THAN OR SMALL ENTITY</small>		
<b>AMENDMENT A</b>	<b>CLAIMS REMAINING AFTER AMENDMENT</b>		<b>HIGHEST NUMBER PREVIOUSLY PAID FOR</b>	<b>PRESENT EXTRA</b>	<b>RATE</b> <b>ADDI- TIONAL FEE</b> X\$ 9- X43- +145- TOTAL ADDT. FEE		<b>RATE</b> <b>ADDI- TIONAL FEE</b> X\$18- X86- +290- TOTAL ADDT. FEE
	Total 40 Minus		-- 0	-- 0			
<b>Independent</b> 1 Minus					-- 0		
<b>FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM</b> <input type="checkbox"/>							
<b>AMENDMENT B</b>	<b>CLAIMS REMAINING AFTER AMENDMENT</b>		<b>HIGHEST NUMBER PREVIOUSLY PAID FOR</b>	<b>PRESENT EXTRA</b>	<b>RATE</b> <b>ADDI- TIONAL FEE</b> X\$ 9- X43- +145- TOTAL ADDT. FEE		<b>RATE</b> <b>ADDI- TIONAL FEE</b> X\$18- X86- +290- TOTAL ADDT. FEE
	Total 31 Minus		-- 40	-- 0			
<b>Independent</b> 4 Minus					-- 0		
<b>FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM</b> <input type="checkbox"/>							
<b>AMENDMENT C</b>	<b>CLAIMS REMAINING AFTER AMENDMENT</b>		<b>HIGHEST NUMBER PREVIOUSLY PAID FOR</b>	<b>PRESENT EXTRA</b>	<b>RATE</b> <b>ADDI- TIONAL FEE</b> X\$ 9- X43- +145- TOTAL ADDT. FEE		<b>RATE</b> <b>ADDI- TIONAL FEE</b> X\$18- X86- +290- TOTAL ADDT. FEE
	Total 33 Minus		-- 40	-- 1			
<b>Independent</b> 3 Minus					-- 4		
<b>FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM</b> <input type="checkbox"/>							
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.							